4/13/18 9:49 A.M.

Chapter No. 98 18/HR31/A328SG AM / EH

# HOUSE BILL NO. 1598

Originated in House \_\_\_\_\_\_

## HOUSE BILL NO. 1598

AN ACT MAKING AN APPROPRIATION TO THE GOVERNOR'S OFFICE-DIVISION OF MEDICAID FOR THE PURPOSE OF PROVIDING MEDICAL ASSISTANCE UNDER THE MISSISSIPPI MEDICAID LAW AND DEFRAYING THE EXPENSES OF THE ADMINISTRATION OF THAT LAW FOR THE FISCAL YEAR 2019.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

SECTION 2. The following sum, or so much thereof as may be necessary, is appropriated out of any money in the State Treasury to the credit of the Medical Care Fund created by Section 43-13-143, Mississippi Code of 1972, for the purpose of providing

H. B. No. 1598 18/HR31/A328SG medical assistance under the Mississippi Medicaid Law for the fiscal year beginning July 1, 2018, and ending June 30, 2019 ..... \$ 389,186,040.00.

Prior period recovery of funds may be maintained and expended by the division when the recovery is received or finalized. Any recoveries due to audits or third party recoveries may be used to offset the cost of such audits and third party recoveries and as such, the division may escalate Contractual Services as needed for these purposes.

 **SECTION 5.** Of the funds appropriated under the provisions of this act, the following positions are authorized:

#### AUTHORIZED POSITIONS:

Permanent:	Full	Time	* ** * ** * ** * * * * *	997
Time-Limited:	Part	Time		2
	Full	Time		33
	Part	Time		0

With the funds herein appropriated, it shall be the agency's responsibility to make certain that funds required to be appropriated for "Personal Services" for Fiscal Year 2020 do not exceed Fiscal Year 2019 funds appropriated for that purpose, unless programs or positions are added to the agency's Fiscal Year 2019 budget by the Mississippi Legislature. Based on data provided by the Legislative Budget Office, the State Personnel Board shall determine and publish the projected annual cost to fully fund all appropriated positions in compliance with the provisions of this act. It shall be the responsibility of the agency head to ensure that no single personnel action increases this projected annual cost and/or the Fiscal Year 2019 appropriations for "Personal Services" when annualized, with the exception of escalated funds and the award of benchmarks. If, at the time the agency takes any action to change "Personal Services," the State Personnel Board determines that the agency has taken an action which would cause the agency to exceed this projected annual cost or the Fiscal Year 2019 "Personal Services"

appropriated level, when annualized, then only those actions which reduce the projected annual cost and/or the appropriation requirement will be processed by the State Personnel Board until such time as the requirements of this provision are met.

Any transfers or escalations shall be made in accordance with the terms, conditions and procedures established by law or allowable under the terms set forth within this act. The State Personnel Board shall not escalate positions without written approval from the Department of Finance and Administration. The Department of Finance and Administration shall not provide written approval to escalate any funds for salaries and/or positions without proof of availability of new or additional funds above the appropriated level.

No general funds authorized to be expended herein shall be used to replace federal funds and/or other special funds which are being used for salaries authorized under the provisions of this act and which are withdrawn and no longer available.

None of the funds herein appropriated shall be used in violation of Internal Revenue Service's Publication 15-A relating to the reporting of income paid to contract employees, as interpreted by the Office of the State Auditor.

SECTION 6. It is the intention of the Legislature that the Governor's Office - Division of Medicaid shall maintain complete accounting and personnel records related to the expenditure of all funds appropriated under this act and that such records shall be

in the same format and level of detail as maintained for Fiscal Year 2018. It is further the intention of the Legislature that the agency's budget request for Fiscal Year 2020 shall be submitted to the Joint Legislative Budget Committee in a format and level of detail comparable to the format and level of detail provided during the Fiscal Year 2019 budget request process with the Children's Health Insurance Program (CHIP) being separated from the Medical Services Program and submitted as a separate program. In addition, the performance measures reported for the Medical Services Program shall include an unduplicated case count of individuals served by eligibility status, and the number and the costs of emergency room visits.

SECTION 7. In compliance with the "Mississippi Performance Budget and Strategic Planning Act of 1994," it is the intent of the Legislature that the funds provided herein shall be utilized in the most efficient and effective manner possible to achieve the intended mission of this agency. Based on the funding authorized, this agency shall make every effort to attain the targeted performance measures provided below:

FY2019

## Performance Measures

Target

Administrative Services

Admin as a % of Total Budget

5.40

Third Party Liability Cost Avoided (\$Thou)

1,133,052

% of Clean Claims Processed within 30 days

of receipt	99.00
% of Clean Claims Processed within 90 days	
of receipt	100.00
Applications Processed within Std. of	
Promptness (%) - Medicaid	90.00
Third Party Funds Recovered (\$)	8,704,229
Providers Submitting Electronic Claims	37,500
Turnover Rate of Employees (%)	11.00
Medical Services	
Medicaid Recipients - Enrolled (Persons)	719,632
% MSCAN Diabetic members aged 17-75	
receiving HBA1c test	88.00
% Change in number of recipients enrolled	
from last year	1.00
% Change in number of providers from last	
year	8.00
% MSCAN members with persistent asthma are	
appropriately prescribed medication	80.00
Costs of Emergency Room Visits (\$)	157,553,191
Number of Emergency Room Visits	523,132
Rate of EPSDT well child screening	75.00
% Medicaid beneficiaries assigned to a PCP	100.00
% change of Medicaid beneficiaries assigned	
to a managed care company	2.00
Child Physical Exams (ages 0-20)	297,067

Adult Physical Exams (21-older)	2,115
Number of Fraud and Abuse Cases	
Investigated	210
Number of Kidney Dialysis Trips	533,646
Number of Medicaid Providers	40,000
Medicaid beneficiaries assigned a PCP	490,000
Number of Medicaid beneficiaries assigned	
to a managed care company	490,000
Child's Health Ins Prg (chip)	
CHIP Enrollees	48,583
Applications Processed within Std. of	
Promptness (%) - CHIP	90.00
Home & Com Based Waiver Prg	
Elderly & Disabled - Persons Served	20,000
(E&D) Change in persons on waiting list (%)	-10.00
(AL) Change in persons on waiting list (%)	20.00
Elderly & Disabled - Funded Slots	17,800
Elderly & Disabled - Total Authorized Slots	21,500
(IL) Change in persons on waiting list (%)	10.00
(TBI) Change in persons on waiting list (%)	75.00
Assisted Living - Persons Served	640
Assisted Living - Funded Slots	628
(IDD) Change in persons on waiting list (%)	10.00
Assisted Living - Total Authorized Slots	1,100
Independent Living - Persons Served	2,950

H. B. No. 1598 18/HR31/A328SG Page 7

Independent Living - Funded Slots	2,850
Independent Living - Total Authorized Slots	6,500
Traumatic Brain Injury - Persons Served	950
Traumatic Brain Injury - Funded Slots	950
Traumatic Brain Injury - Total Authorized	
Slots	3,500
Intellectual Disability - Persons Served	2,515
Intellectual Disability - Funded Slots	2,515
Intellectual Disability - Total Authorized	
Slots	2,900

A reporting of the degree to which the performance targets set above have been or are being achieved shall be provided in the agency's budget request submitted to the Joint Legislative Budget Committee for Fiscal Year 2020.

SECTION 8. It is the intention of the Legislature that whenever two (2) or more bids are received by this agency for the purchase of commodities or equipment, and whenever all things stated in such received bids are equal with respect to price, quality and service, the Mississippi Industries for the Blind shall be given preference. A similar preference shall be given to the Mississippi Industries for the Blind whenever purchases are made without competitive bids.

SECTION 9. Of the funds appropriated herein, an amount not to exceed Two Hundred Fifty Thousand Dollars (\$250,000.00) is provided to implement an Adult Foster Care program for Medicaid

recipients as authorized by Section 43-13-117, Mississippi Code of 1972.

SECTION 10. The division shall provide statistical and financial reports on a monthly basis to the Legislative Budget Office and the PEER Committee. These reports shall include, but are not limited to, an accounting of all funds spent and participant statistics medical program, the CHIP program, the Dialysis Transportation program, and each of the Home and Community Based Waiver programs, and an accounting of all funds spent in the administrative program and any other information requested by the Legislative Budget Office and the PEER Committee. The Division of Medicaid shall implement the improvements to this report as outlined in Finding Number 25 of the February 21, 2017, Navigant report, titled Mississippi Operational and Performance Assessment of the Governor's Office, Division of Medicaid (DOM).

The Division of Medicaid shall perform its cash flow projections on a predetermined monthly schedule and make this and any other information requested available, upon request, to the Chair of the Senate Public Health and Welfare Committee, the House Public Health and Human Services Committee, the House Medicaid Committee, the House and Senate Appropriations Committees, the Legislative Budget Office and the PEER Committee. A summary of this cash flow projection shall also be presented in the report referenced in the above paragraph.

SECTION 11. Of the funds appropriated in this act, the Division of Medicaid shall pay the maximum per diem rate allowed by federal law or regulation to providers of adult day services for each day of service provided to an eligible beneficiary. In order to receive this per diem rate of reimbursement, providers of adult day services shall participate in the Elderly and Disabled Waiver Program for Home and Community Based Services.

SECTION 12. In the division's Fiscal Year 2020 budget submission, all Medicaid 1915 (C) Home and Community Based Waivers shall be presented as a budget program separate from the Medical Services Program.

SECTION 13. Of the funds appropriated under the provisions of this act in an amount not to exceed, Two Million Seven Hundred Fifty Thousand Dollars (\$2,750,000.00) is provided for the purpose of funding a temporary program to provide nonemergency transportation to locations for necessary dialysis services for end-stage renal disease patients who are sixty-five (65) years of age or older or are disabled as determined under Section 1614(a)(3) of the federal Social Security Act, as amended, whose income did not exceed one hundred thirty-five percent (135%) of the nonfarm official poverty level as defined by the Office of Management and Budget and whose eligibility was covered under the former category of eligibility known as Poverty Level Aged and Disabled (PLADS).

SECTION 14. Of the funds appropriated in Sections 1 and 3, Three Hundred Ninety-eight Thousand Five Hundred Fifty Dollars (\$398,550.00) General Funds and One Million One Hundred One Thousand Four Hundred Fifty Dollars (\$1,101,450.00) Special Funds are provided for five (5) slots in the Assisted Living Waiver program for persons with Traumatic Brain Injury and in need of Cognitive Rehabilitation. The Division shall develop eligibility criteria for these additional slots.

SECTION 15. It is the intention of the Legislature that the funds appropriated in this act to the Governor's Office - Division of Medicaid for the Mississippi Coordinated Access Network (MS-CAN) program be used in the most efficient and effective manner possible to achieve the intended mission of the division. The division and the coordinated care organizations with which the division has contracted to conduct the MS-CAN program shall establish baselines for the health-related outcome measurement for each of the following health focus areas for presentation at the Joint Legislative Budget Committee hearings for Fiscal Year 2019, which will be used as the baseline levels for establishing targets for improvements in quality of care performance measures for the MS-CAN program in Fiscal Year 2019 and later fiscal years:

## Health Focus Area

Blood sugar well controlled in Percentage of members with people with diabetes

#### Measurement

HbAlc results less than or equal to 8.0%

Asthma-related emergency room (ER) visits

Congestive heart failure (CHF)

Percentage reduction in asthma-related ER visits
Percentage decrease in
CHF-Related hospital readmissions

Obesity

Percentage of persons age
eighteen and older classified
as having a documented Body
Mass Index (BMI) of 30.0 or
more regardless of sex

In addition, for comparison purposes, these same baselines for the health-related outcome measurements shall be established for similar Medicaid recipients who are not enrolled in the MS-CAN program. It is the further intention of the Legislature that, for the Fiscal Year 2019, the Division of Medicaid shall not restrict HIV antiretroviral medications.

SECTION 16. Of the funds appropriated herein, an amount not to exceed Three Hundred Thousand Dollars (\$300,000.00) is provided for payments to certain eligible obstetricians and gynecologists for the provision of certain primary care services, as defined by the division, at up to one hundred percent (100%) of the Medicare Physician fee schedule.

SECTION 17. Of the funds appropriated herein, Five Hundred Thousand Dollars (\$500,000.00) shall be allocated to the Delta

Health Alliance for a Patient Centered Medical Model Home in Leland, Mississippi.

SECTION 18. No funds appropriated by this act may be expended until the Division of Medicaid provides for the reimbursement of long acting reversible contraceptives (LARCs) insertion at the time of delivery, outside of the current Medicaid All Patient Refined-Diagnosis Related Group Version (APR-DRG) payment methodology, to Medicaid Enrolled hospital providers, and the Division of Medicaid considers the coverage of LARC insertion at the time of delivery to be an add-on benefit, paid according to a payment schedule developed by the Division, that is not included in the APR-DRG reimbursement process.

SECTION 19. (1) Of the funds appropriated in Sections 1 and 4, an amount not to exceed Three Million Nine Hundred Forty-five Thousand Eight Hundred Eighty-nine Dollars (\$3,945,889.00) shall be provided for the Mississippi Delta Medicaid Population Health Demonstration Project, of which funds (a) Two Million Eight Hundred Seventy-nine Thousand Fifty-one Dollars (\$2,879,051.00) shall be used for the continuation of the existing program and shall be transferred no later than July 31, 2018, and (b) One Million Sixty-six Thousand Eight Hundred Thirty-eight Dollars (\$1,066,838.00) shall be used as state funds for the purposes of drawing federal matching funds for expansion of the program.

(2) As conditions of receiving the funds appropriated in Sections 1 and 4, (a) the Division of Medicaid shall attempt to

procure federal matching funds for all state support funds appropriated to the Mississippi Delta Medicaid Population Health Demonstration Project, without delaying any payments authorized by this section that are due on or before July 31, 2018, and (b) a progress report on the Mississippi Delta Medicaid Population Health Demonstration Project shall be provided to the Chairmen of the Senate and House Public Health Committees, Senate and House Medicaid Committees and the Senate and House Appropriations Committees on or before December 31, 2018.

SECTION 20. It is the intention of the Legislature that the Governor's Office, Division of Medicaid and the Department of Human Services shall work together to implement HB 1090 of the 2017 Regular Session, known as the "Medicaid and Human Services Transparency and Fraud Prevention Act".

SECTION 21. The money herein appropriated shall be paid by the State Treasurer out of any money in the State Treasury to the credit of the proper fund or funds as set forth in this act, upon warrants issued by the State Fiscal Officer; and the State Fiscal Officer shall issue his warrants upon requisitions signed by the proper person, officer or officers, in the manner provided by law.

SECTION 22. This act shall take effect and be in force from and after July 1, 2018.

PASSED BY THE HOUSE OF REPRESENTATIVES

SPEAKER OF THE HOUSE OF REPRESENTATIVES

PASSED BY THE SENATE

March 26, 201

PRESIDENT OF THE SENATE

APPROVED BY THE GOVERNOR Snyat 13,2018
9:49 m

GOVERNOR